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Chairman Stahl and Members of the House Families and Children Services Committee:

The Michigan Association of Substance Abuse Coordinating Agencies (MASACA) recognizes the need for the concepts in the Work First/welfare reform package detailed in HB 5438 - 5446. MASACA is the state organization of substance abuse coordinating agencies that are statutorily responsible for ensuring that substance abuse services are available for people who cannot otherwise afford them. MASACA is concerned, however, that substance abuse assessment and treatment is not included as part of a participant's Work First contract.

Michigan's disadvantaged citizens deserve access to substance abuse services, a major barrier to gainful employment. The majority of people who receive appropriate treatment are able to lead healthy, productive lives. Allowing for participants to count treatment and education as part of their work requirement is also an important step in assuring we are putting healthy people into the work force. Substance abuse is a disorder that can cause other physical problems, as well as co-existing sometime devastatingly with mental illness.

The package of bills allows for an exemption from Work First requirements if deemed necessary and appropriate by a physician, psychiatrist, or psychologist, which MASACA supports. However, this allowance only comes at failure in either finding or keeping a job, and does not specifically acknowledge that entry into a substance abuse treatment program is sometimes a necessary step towards qualifying someone for a job. Substance abuse services are crucial in finding and keeping a job, and many people currently in the existing work force use substance abuse services to help them keep their jobs. MASACA understands that one of every three families is touched by addiction and its related disorders. Given this, MASACA recommends that access to substance abuse assessment and treatment be assigned as an initial assessment and that treatment be included as part of a Work First participant's responsibilities.

Another concern is that of recurrence. Inherent in substance abuse treatment is the understanding that some clients may experience a relapse, as is true for other chronic diseases. MASACA is concerned that if there is a relapse, and subsequent dismissal from the job, that the benefits for that individual will be cut-off. While it is understood that there is a degree of flexibility in a Work First plan between the participant and caseworker, we still believe that the sanctions outlined in this package of bills would treat a relapse, regardless of its coupling with a dismissal from the participant's job, as a violation of the participant's plan and subject that person to a sanction. Further, we are concerned that a

relapse then coupled with dismissal would actually count as two separate violations of the participants plan and thus subject them to further heavy sanctions according to the bill.

Removing someone with substance abuse problems from assistance, even for only one month, is the opposite direction to take those patients. In fact, many substance abuse problems relate to inability to find or keep gainful employment. Instead, we urge the House to recognize the potential for relapse in substance abuse treatment, and to be explicit that as long as the participant continues to receive treatment, a relapse and potential subsequent dismissal cannot constitute a violation of the Work First requirements.

MASACA is generally supportive of an allowance for substance abuse treatment in a Work First participant's work plan. We also have the ability to participate directly with the Work First system to help refer patients to substance abuse treatment services. Our concerns reflect the long and difficult road for patients in a substance abuse treatment modality and the difficulty in finding and keeping employment. We also would like to remind the committee that unlike community mental health, the majority of our clients are not Medicaid eligible. Rather, the majority of them receive treatment funded through state and federal grants. The substance abuse community would be pleased to take on additional challenges, but we would ask you to help us receive the resources so that we can perform our new responsibilities well. MASACA thanks the committee for the opportunity to comment on the proposal, and we hope you will consider our recommendations.